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FEC FORM 3X

REPORT OF RECEIPTS AND DISBURSEMENTS

For Other Than An Authorized Committee Office Use Only 1. NAME OF **USE FEC MAILING LABEL** Example: If typing, type COMMITTEE (in full) OR TYPE OR PRINT ₩ over the lines CNA FINANCIAL CORPORATION CITIZENS FOR GOOD GOVERNMENT CNA PLAZA - CORPORATE TAX (24S) ADDRESS (number and street) Check if different than previously **CHICAGO** IL 60685 reported. (ACC) FEC IDENTIFICATION NUMBER **STATE** CITY A ZIPCODE A IS THIS **AMENDED** NEW C00078287 Χ REPORT OR (N) (A) **TYPE OF REPORT** (b) Monthly Nov 20 (M11) Feb 20 (M2) May 20 (M5) Aug 20 (M8) (Non-Election Year Only) Report (Choose One) Due On: Dec 20 (M12) (Non-Election Year Only) Mar 20 (M3) Jun 20 (M6) Sep 20 (M9) (a) Quarterly Reports: Apr 20 (M4) Jul 20 (M7) Oct 20 (M10) Jan 31 (YE) April 15 Quarterly Report(Q1) (c) 12-Day Primary (12P) General (12G) Runoff (12R) July 15 PRE-Election Quarterly Report(Q2) Report for the: Convention (12C) Special (12G) October 15 Quarterly Report(Q3) January 31 Quarterly Report(YE) in the Election on State of July 31 Mid-Year Х (d) 30-Day Report(Non-election Year Only) (MY) Post -Election General (30G) Runoff (30R) Special (30S) Report for the: Termination Report (TER) in the Election on State of 0 1 0 1 2005 06 30 2005 Covering Period through I certify that I have examined this Report and to the best of my knowledge and belief it is true, correct and complete. Karen E. Melchert Type or Print Name of Treasurer Electronically Filed by Karen E. Melchert 07 27 2006 Signature of Treasurer Date NOTE: Submission of false, erroneous, or incomplete information may subject the person signing this Report to the penalties of 2 U.S.C 437g. Office **FEC FORM 3X** Use (Rev. 02/2003) Only

FEC Form 3X (Rev. 02/2003)

SUMMARY PAGE

OF RECEIPTS AND DISBURSEMENTS

Page 2

Write or Type Committee Name CNA FINANCIAL CORPORATION CITIZENS FOR GOOD GOVERNMENT [®] D " D 0 1 0 1 2005 0.6 3 0 2005 Report Covering the Period: From: To: **COLUMN A COLUMN B This Period** Calendar Year-to-Date (a) Cash on Hand [°]2005 24014.26 January 1 (b) Cash on Hand at 24014.26 Begining of Reporting Period 51736.91 51736.91 (c) Total Receipts (from Line 19) (d) Subtotal (add lines 6(b) and 6(c) for Column A and Lines 75751.17 75751.17 6(a) and 6(c) for Column B) 29601.94 29601.94 7. Total Disbursements (from Line 31) Cash on Hand at Close of Reporting Period 46149.23 46149.23 (subtract Line 7 from Line 6(d)) 9. Debts and Obligations owed the committee (Itemize all on 0.00 Schedule C and/or Schedule D) 10. Debts and Obligations owed the committee (Itemize all on 0.00 Schedule C and/or Schedule D) This Committee has qualified as a multicandidate committee. (see FEC FORM 1M) For further information contact: Federal Election Commission 999 E street, NW Washington, DC 20463 Toll Free 800-424-9530 Local 202-694-1100

DETAILED SUMMARY PAGE OF RECEIPTS

FEC Form 3X (Rev. 02/2003) Page 3

Write or Type Committee Name

CNA FINANCIAL CORPORATION CITIZENS FOR GOOD GOVERNMENT

| | I. Receipts | COLUMN A Total This Period | COLUMN B Calendar Year-to-Date |
|-----|--|-------------------------------|-----------------------------------|
| 11. | Contributions (other than loans) From: (a) Individuals/Persons Other | | |
| | Than Political Committees (i) Itemized (use Schedule A) | 34050.00 | 34050.00 |
| | (ii) Unitemized | 17686.91 | 17686.91 |
| | (iii) TOTAL (add Lines 11(a)(i) and (ii) | 51736.91 | 51736.91 |
| | (b) Political Party Committees | 0.00 | 0.00 |
| | (c) Other Political Committees (such as PACs) | 0.00 | 0.00 |
| | (d) Total Contributions (add Lines 11(a)(iii),(b) and (c)) (Carry Totals to Line 33, page 5) | 51736.91 | 51736.91 |
| 2. | Transfers From Affiliated/Other Party Committees | 0.00 | 0.00 |
| 3. | All Loans Received | 0.00 | 0.00 |
| 4. | Loan Repayments Received Offsets To Operating Expenditures | 0.00 | 0.00 |
| | (Refunds, Rebates, etc.) (Carry Totals to Line 37, page 5) | 0.00 | 0.00 |
| 6. | Refunds of Contributions Made to Federal candidates and Other Political Committees | 0.00 | 0.00 |
| 7. | Other Federal Receipts (Dividends, Interest, etc.) | 0.00 | 0.00 |
| 8. | Transfers from Non-Federal and Levin Funds | | |
| | (a) Non-Federal Account (from Schedule H3) | 0.00 | 0.00 |
| | (b) Levin Funds (from Schedule H5) | 0.00 | 0.00 |
| | (c) Total Transfer (add 18(a) and 18(b)). | 0.00 | 0.00 |
| 9. | Total Receipts (add Lines 11(d), 12, 13, 14, 15, 16, 17, and 18(c)) | 51736.91 | 51736.91 |
| :0. | Total Federal Receipts (subtract Line 18(c) from Line 19) | 51736.91 | 51736.91 |

DETAILED SUMMARY PAGE

of Disbursements

Page 4

FEC Form 3X (Rev. 02/2003)

| | II. DISBURSEMENTS | COLUMN A Total This Period | COLUMN B Calendar Year-to-Date |
|-----|---|-------------------------------|-----------------------------------|
| 21. | Operating Expenditures: (a) Shared Federal/Non-Federal | | |
| | Activity (from Schedule H4) | 0.00 | 0.00 |
| | (i) Federal Share | 0.00 | 5.55 |
| | (ii) Non-Federal Share | 0.00 | 0.00 |
| | (b) Other Federal Operating | 101.94 | 101.94 |
| | Expenditures(c) Total Operating Expenditures | 101.01 | |
| | (add 21(a)(i), (a)(ii) and (b)) | 101.94 | 101.94 |
| 2. | Transfers to Affiliated/Other Party Committees | 0.00 | 0.00 |
| 3. | Contributions to Federal Candidates/Committees | | |
| | and Other Political Committees | 25500.00 | 25500.00 |
| | Independent Expenditure (use Schedule E) | 0.00 | 0.00 |
| 5. | Coordinated Expenditures Made by Party Committees (2 U.S.C. 441a(d)) (use Schedule F) | 0.00 | 0.00 |
| • | , | 0.00 | 0.00 |
| ö. | Loan Repayments Made | 0.00 | 0.00 |
| | Loans MadeRefunds of Contributions To: | 0.00 | 0.00 |
| ٠. | (a) Individuals/Persons Other Than Political Committees | 0.00 | 0.00 |
| | (b) Political Party Committees | 0.00 | 0.00 |
| | (c) Other Political Committees | 0.00 | 0.00 |
| | (such as PACs)(d) Total Contribution Refunds | 0.00 | 0.00 |
| | (add Lines 28(a), (b), and (c)) | 0.00 | 0.00 |
| 9. | Other Disbursements | 4000.00 | 4000.00 |
| ٥. | Federal Election Activity (2 U.S.C 431(20)) | | |
| | (a) Shared Federal Election Activity | | |
| | (from Schedule H6) | 0.00 | 0.00 |
| | (i) Federal Share | | |
| | (ii) "Levin" Share | 0.00 | 0.00 |
| | (b) Federal Election Activity Paid Entirely With Federal Funds | 0.00 | 0.00 |
| | (c) Total Federal Election Activity (add Lines 30(a)(i), 30(a)(ii) and 30(b)) | 0.00 | 0.00 |
| | | | |
| ۱. | Total Disbursements (add Lines 21(c), 22, 23, 24, 25, 26, 27, 28(d), 29 and 30(c)) | 29601.94 | 29601.94 |
| | _0,, _0, _0, _, _0(0), _0 and 00(0)) | | |
| 2. | Total Federal Disbursements | | |
| | (subtract Line 21(a)(ii) from Line 30(a)(ii) from Line 31) | 29601.94 | 29601.94 |

DETAILED SUMMARY PAGE

of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 5

| III. Net Contributio Expenditure | | COLUMN A Total This Period | COLUMN B Calendar Year-to-Date |
|--|-----|-------------------------------|-----------------------------------|
| 33. Total Contributions (other from Line 11(d), page 3) | ' I | 51736.91 | 51736.91 |
| 34. Total Contribution Refund (from Line 28(d)) | | 0.00 | 0.00 |
| Net Contributions (other the subtract Line 34 from Line) | ′ | 51736.91 | 51736.91 |
| 36. Total Federal Operating E (add Line 21(a)(i) and Lin | | 101.94 | 101.94 |
| 37. Offsets to Operating Exportance (from Line 15, page 3) | | 0.00 | 0.00 |
| 38. Net Operating Expenditure (subtract Line 37 from Lir | | 101.94 | 101.94 |

| S | CHEDULE A (FEC Form 3X) | | Llas apparata aphadula(a) | FOR LINE NUMBER: PAGE 6/34 |
|-------------|---|---------------------------|---|---|
| | EMIZED RECEIPTS | | Use separate schedule(s) or each category of the | (check only one) |
| 11 | EIMIZED RECEIP 13 | | Detailed Summary Page | X 11a 11b 11c 12 |
| | | | | 13 14 15 16 17 |
| Ar | y information copied from such Reports and Stat for commercial purposes, other than using the na | ements may ame and add | not be sold or used by any perso dress of any political committee to | on for the purpose of soliciting contributions solicit contributions from such committee. |
| <u></u> | NAME OF COMMITTEE (In Full) | | | |
| $ \rangle$ | CNA FINANCIAL CORPORATION CITIZ | ENS EOE | COOD COVERNMENT | |
| | ONAT INANOIAL GOTTI OTTATION OFFIZ | LINGTO | 1 GOOD GOVERNIVILIVI | |
| _ | Full Name (Last, First, Middle Initial) | | | |
| A. | | | | Date of Receipt |
| | Mailing Address CNA Plaza | | | 05 13 2005 |
| | City | State | Zip Code | Transaction ID: SA11A1.6905 |
| | Chicago | IL | 60685 | Amount of Each Receipt this Period |
| | FEC ID number of contributing | | | |
| | federal political committee. | C | | 500.00 |
| | Name of Franksia | 0 | | Contribution |
| | Name of Employer CNA Insurance | Occupation Executive | | |
| | Receipt For: | | Year-to-Date ▼ | + |
| | Primary General | / igg. ogato | | 1 |
| | Other (specify) ▼ | | 500.00 | |
| | | | | |
| ь | Full Name (Last, First, Middle Initial) | | | Data of Bossint |
| В. | David Ballard Mailing Address CNA Plaza | | | Date of Receipt |
| | Mailing Address CNA Plaza | | | 05 13 2005 |
| | City | State | Zip Code | Transaction ID: SA11A1.6910 |
| | Chicago | IL | 60685 | Amount of Each Receipt this Period |
| | FEC ID number of contributing | C | | 300.00 |
| | federal political committee. | | | |
| | Name of Employer | Occupation | 1 | Contribution |
| | CNA | Executive |) | |
| | Receipt For: | Aggregate | Year-to-Date ▼ | |
| | Primary General | | 300.00 | 1 |
| | Other (specify) | 0 0 | 000.00 | |
| _ | Full Name (Last, First, Middle Initial) | | | |
| C. | John Brand | | | Date of Receipt |
| | Mailing Address CNA Plaza | | | M M / D D / Y Y Y Y |
| | C'h | State | 7in Codo | 05 13 2005 |
| | Chicago | State | Zip Code 60685 | Transaction ID: SA11A1.6919 |
| | • | | 00003 | Amount of Each Receipt this Period |
| | FEC ID number of contributing federal political committee. | C | | 750.00 |
| | · | | | Contribution |
| | Name of Employer CNA | Occupation | | |
| | Receipt For: | Executive | e Year-to-Date ▼ | - |
| | Primary General | Aggregate | | 1 |
| | Other (specify) | | 750.00 | |
| _ | | | | 1 |
| | | | | |
| s | UBTOTAL of Receipts This Page (optional) | | | 1550.00 |
| \vdash | | | | - |

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| | CHEDULE A (FEC Form 3X) | | Use separate schedule(s) | FOR LINE NUMBER: PAGE 7/34 (check only one) |
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| IT | EMIZED RECEIPTS | | or each category of the Detailed Summary Page | X 11a 11b 11c 12 13 14 15 16 17 |
| Ar | y information copied from such Reports and Stat for commercial purposes, other than using the na | ements may | y not be sold or used by any perso dress of any political committee to | on for the purpose of soliciting contributions |
| | NAME OF COMMITTEE (In Full) | | | |
| \rangle | CNA FINANCIAL CORPORATION CITIZ | ENS FOR | R GOOD GOVERNMENT | |
| Α. | Full Name (Last, First, Middle Initial) George Busche | | | Date of Receipt |
| | Mailing Address CNA Plaza | | | 04 14 2005 |
| | City | State | Zip Code | Transaction ID: SA11A1.6882 |
| | Chicago | IL | 60685 | Amount of Each Receipt this Period |
| | FEC ID number of contributing federal political committee. | C | | 500.00 |
| | Name of Employer CNA | Occupatio Executive | | Contribution |
| | Receipt For: | Aggregate | e Year-to-Date ▼ | |
| | Primary General Other (specify) ▼ | | 500.00 | |
| В. | Full Name (Last, First, Middle Initial) Bruce Cluskey, q | | | Date of Receipt |
| | Mailing Address CNA Plaza | | | 05 13 Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y |
| | City | State | Zip Code | Transaction ID: SA11A1.6923 |
| | Chicago | IL | 60685 | Amount of Each Receipt this Period |
| | FEC ID number of contributing federal political committee. | C | | 300.00 |
| | Name of Employer CNA | Occupatio Executive | | Contribution |
| | Receipt For: | Aggregate | e Year-to-Date ▼ | |
| | Primary General Other (specify) ▼ | | 300.00 | |
| <u> </u> | Full Name (Last, First, Middle Initial) Michael Colliau | | | Date of Receipt |
| | Mailing Address CNA Plaza | | | 05 13 2005 |
| | City | State | Zip Code | Transaction ID: SA11A1.6926 |
| | Chicago | IL | 60685 | Amount of Each Receipt this Period |
| | FEC ID number of contributing federal political committee. | C | | 350.00 |
| | Name of Employer CNA Insurance | Occupatio Executive | | Contribution |
| | Receipt For: | Aggregate | e Year-to-Date ▼ | |
| | Primary General | | 050.00 | 1 |
| | Other (specify) | | 350.00 | |
| s | UBTOTAL of Receipts This Page (optional) | | | 1150.00 |

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| SCHEDULE A (FEC Form 3X) | Use separate schedule(s) | FOR LINE NUMBER: PAGE 8/34 |
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| Any information copied from such Reports and Si or for commercial purposes, other than using the | tatements may not be sold or used by any pers name and address of any political committee to | on for the purpose of soliciting contributions |
| NAME OF COMMITTEE (In Full) | | |
| CNA FINANCIAL CORPORATION CIT | IZENS FOR GOOD GOVERNMENT | |
| Full Name (Last, First, Middle Initial) Cameron Cook | | Date of Receipt |
| Mailing Address CNA Plaza | | 05 13 7 2005 |
| City Chicago | State Zip Code II 60685 | Transaction ID: SA11A1.6927 |
| FEC ID number of contributing | IL 60685 | Amount of Each Receipt this Period 300.00 |
| federal political committee. | C | |
| Name of Employer CNA Insurance | Occupation Executive | Contribution |
| Receipt For: | Aggregate Year-to-Date ▼ | |
| Primary General Other (specify) ▼ | 300.00 | |
| Full Name (Last, First, Middle Initial) 3. Linda Core | | Date of Receipt |
| Mailing Address CNA Plaza | 05 13 YYYYY | |
| City | State Zip Code | Transaction ID: SA11A1.6929 |
| Chicago | IL 60685 | Amount of Each Receipt this Period |
| FEC ID number of contributing federal political committee. | C | 500.00 |
| Name of Employer CNA | Occupation Executive | Contribution |
| Receipt For: | Aggregate Year-to-Date ▼ | |
| Primary General | 500.00 | 7 |
| Other (specify) | 0 0 0 0 0 0 0 0 | |
| Full Name (Last, First, Middle Initial) Jeffrey Day | | Date of Receipt |
| Mailing Address CNA Plaza | | 05 13 2005 |
| City | State Zip Code | Transaction ID: SA11A1.6930 |
| Chicago | IL 60685 | Amount of Each Receipt this Period |
| FEC ID number of contributing federal political committee. | C | 300.00 |
| Name of Employer CNA Insurance | Occupation Executive | Contribution |
| Receipt For: | Aggregate Year-to-Date ▼ | |
| Primary General Other (specify) ▼ | 300.00 | |
| SUBTOTAL of Receipts This Page (optional) | | 1100.00 |
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| | CHEDULE A (FEC Form 3X) EMIZED RECEIPTS | | Use separate schedule(s) or each category of the Detailed Summary Page | FOR LINE NUMBER: PAGE 9/34 (check only one) X 11a 11b 11c 12 13 14 15 16 17 |
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| An or | y information copied from such Reports and Stater for commercial purposes, other than using the nam | nents may ne and add | not be sold or used by any perso dress of any political committee to | on for the purpose of soliciting contributions solicit contributions from such committee. |
| $\overline{\rangle}$ | NAME OF COMMITTEE (In Full) CNA FINANCIAL CORPORATION CITIZE | NS FOR | GOOD GOVERNMENT | |
| A. 3. | Name of Employer CNA C | State IL C Description Executive Aggregate | | Date of Receipt M M A 26 2005 Transaction ID: SA11A1.6874 Amount of Each Receipt this Period 300.00 Contribution |
| | City Chicago FEC ID number of contributing federal political committee. Name of Employer CNA Insurance | State IL Occupation Executive Aggregate | | Transaction ID: SA11A1.6932 Amount of Each Receipt this Period 300.00 Contribution |
| - - - - - - - - - - | Name of Employer CNA C | State IL C Description Executive Aggregate | | Date of Receipt M M |
| s | UBTOTAL of Receipts This Page (optional) | | ······• | 1100.00 |
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| SCHEDULE A (FEC Form 3) | Use separate schedule(s) | FOR LINE NUMBER: PAGE 10 / 34 |
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| II LIVIIZLD RECEIP 13 | Detailed Summary Page | X 11a 11b 11c 12 |
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| Any information copied from such Reports a or for commercial purposes, other than usin | and Statements may not be sold or used by any persong the name and address of any political committee t | son for the purpose of soliciting contributions o solicit contributions from such committee. |
| NAME OF COMMITTEE (In Full) | | |
| 1 \ | N CITIZENS FOR GOOD GOVERNMENT | |
| Full Name (Last, First, Middle Initial) A. Bruce Dmytrow | | Date of Receipt |
| Mailing Address CNA Plaza | | 05 13 7 2005 |
| City | State Zip Code | Transaction ID: SA11A1.6935 |
| <u>Chicago</u> | IL 60685 | Amount of Each Receipt this Period |
| FEC ID number of contributing federal political committee. | C | 500.00 |
| Name of Employer CNA | Occupation Executive | Contribution |
| Receipt For: Primary General Other (specify) ▼ | Aggregate Year-to-Date ▼ 500.00 | |
| Full Name (Last, First, Middle Initial) B. Connie Eggleston | | Date of Receipt |
| Mailing Address CNA Plaza | 0) de 12 - 2 - 0 - de | 05 13 2005 |
| City | State Zip Code | Transaction ID: SA11A1.6937 |
| Chicago | IL 60685 | Amount of Each Receipt this Period |
| FEC ID number of contributing federal political committee. | C | 500.00 |
| Name of Employer CNA | Occupation Executive | Contribution |
| Receipt For: | Aggregate Year-to-Date ▼ | |
| Primary General Other (specify) ▼ | 500.00 | |
| Full Name (Last, First, Middle Initial) C. David Fennell | | Date of Receipt |
| Mailing Address CNA Plaza | | 05 13 YYYY 2005 |
| City | State Zip Code | Transaction ID: SA11A1.6939 |
| Chicago | IL 60685 | Amount of Each Receipt this Period |
| FEC ID number of contributing federal political committee. | C | 300.00 |
| Name of Employer CNA | Occupation Executive | Contribution |
| Receipt For: Primary General Other (specify) ▼ | Aggregate Year-to-Date ▼ 300.00 | |
| SUBTOTAL of Receipts This Page (option | nal) | 1300.00 |

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| | CHEDULE A (FEC Form 3X) EMIZED RECEIPTS | | Use separate schedule(s) or each category of the Detailed Summary Page | FOR LINE NUMBER: PAGE 11 / 34 (check only one) X 11a 11b 11c 12 13 14 15 16 17 |
|-------------|---|------------------------|--|---|
| Ar or | y information copied from such Reports and Stat for commercial purposes, other than using the na | ements may | y not be sold or used by any persodress of any political committee to | on for the purpose of soliciting contributions solicit contributions from such committee. |
| \setminus | NAME OF COMMITTEE (In Full) CNA FINANCIAL CORPORATION CITIZ | ZENS FOR | R GOOD GOVERNMENT | |
| Α. | Full Name (Last, First, Middle Initial) Daniel Fortin | | | Date of Receipt |
| | Mailing Address CNA Plaza | | | 05 09 2005 |
| | City Chicago | State IL | Zip Code 60685 | Transaction ID: SA11A1.6896 Amount of Each Receipt this Period |
| | FEC ID number of contributing federal political committee. | C | | 750.00 |
| | Name of Employer CNA | Occupatio Executive | | Contribution |
| | Receipt For: ☐ Primary ☐ General ☐ Other (specify) ▼ | Aggregate | e Year-to-Date ▼ 750.00 | |
| — В. | Full Name (Last, First, Middle Initial) Janet Frank | | | Date of Receipt |
| | Mailing Address CNA Plaza | | | 05 09 Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y |
| | City | State | Zip Code | Transaction ID: SA11A1.6898 |
| | Chicago | IL | 60685 | Amount of Each Receipt this Period |
| | FEC ID number of contributing federal political committee. | C | | 500.00 |
| | Name of Employer CNA | Occupatio Executive | | Contribution |
| | Receipt For: Primary General Other (specify) ▼ | Aggregate | e Year-to-Date ▼ 500.00 | |
| <u> </u> | Full Name (Last, First, Middle Initial) Michael Gengler | | | Date of Receipt |
| | Mailing Address CNA Plaza | | | 05 26 2005 |
| | City | State | Zip Code | Transaction ID: SA11A1.7449 |
| | Chicago | IL | 60685 | Amount of Each Receipt this Period |
| | FEC ID number of contributing federal political committee. | С | | 750.00 |
| | Name of Employer CNA | Occupatio Executive | | Contribution |
| | Receipt For: | | e Year-to-Date ▼ | 7 |
| | Primary General Other (specify) ▼ | | 750.00 | |
| s | UBTOTAL of Receipts This Page (optional) | | D | 2000.00 |

TOTAL This Period (last page this line number only)

| S | CHEDULE A (FEC Form 3X) | | Use separate schedule(s) | FOR LINE NUMBER: PAGE 12/34 | | |
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| Δr | w information copied from such Reports and Stateme | onte may | not be sold or used by any perso | | | |
| or | ly information copied from such Reports and Stateme for commercial purposes, other than using the name | and add | ress of any political committee to | solicit contributions from such committee. | | |
| \setminus | NAME OF COMMITTEE (In Full) | | | | | |
| | CNA FINANCIAL CORPORATION CITIZEN | IS FOR | GOOD GOVERNMENT | | | |
| | Full Name (Last, First, Middle Initial) | | | | | |
| A. | Connie Gianakas | | | Date of Receipt | | |
| | Mailing Address CNA Plaza | | | 05 13 2005 | | |
| | City | State | Zip Code | Transaction ID: SA11A1.6944 | | |
| | <u>Chicago</u> I | L | 60685 | Amount of Each Receipt this Period | | |
| | FEC ID number of contributing | <u> </u> | | 300.00 | | |
| | federal political committee. | , <u> </u> | | | | |
| | Name of Employer Oc | cupation | 1 | Contribution | | |
| | | cecutive | ! | | | |
| | | ggregate | Year-to-Date ▼ | | | |
| | Primary General Other (specify) ▼ | | 300.00 | | | |
| | Other (specify) | 0 0 | 0 0 0 0 0 0 0 | | | |
| _ | Full Name (Last, First, Middle Initial) | | | | | |
| В. | John Golden | | | Date of Receipt | | |
| | Mailing Address CNA Plaza | | | 05 13 2005 | | |
| | City | State | Zip Code | Transaction ID: SA11A1.6945 | | |
| | <u>Chicago</u> I | L | 60685 | Amount of Each Receipt this Period | | |
| | FEC ID number of contributing federal political committee | · | | 1000.00 | | |
| | federal political committee. | | | | | |
| | Name of Employer Oc | cupation | 1 | Contribution | | |
| | | cecutive | | | | |
| | | ggregate | Year-to-Date ▼ | | | |
| | Primary General Other (specify) | | 1000.00 | | | |
| | Carlot (openity) 🗸 | 0 0 | | | | |
| <u> </u> | Full Name (Last, First, Middle Initial) Todd Greeley | | | Date of Receipt | | |
| Ċ. | Mailing Address CNA Plaza | | | M M / D D / Y Y Y Y | | |
| | | | | 05 13 2005 | | |
| | , | State | Zip Code | Transaction ID: SA11A1.6946 | | |
| | <u>Chicago</u> I | L | 60685 | Amount of Each Receipt this Period | | |
| | FEC ID number of contributing federal political committee | | | 500.00 | | |
| | rodoral political committee. | | | Contribution | | |
| CNIA | | cupation | | Contribution | | |
| | | cecutive | Year-to-Date ▼ | _ | | |
| | Receipt For: Ageneral Ageneral | yyreyale | Tear-IU-Dale ▼ | 1 | | |
| | Other (specify) | | 500.00 | | | |
| _ | | | | | | |
| | | | | 1800.00 | | |
| L _s | UBTOTAL of Receipts This Page (optional) | | ······ | | | |
| T | TOTAL This Period (last page this line number only) | | | | | |

| S | CHEDULE A (FEC Form 3X) | | | FOR LINE NUMBER: PAGE 13/34 |
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| | · | | Use separate schedule(s) or each category of the | (check only one) |
| 11 | EMIZED RECEIPTS | | Detailed Summary Page | X 11a 11b 11c 12 |
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| \setminus | NAME OF COMMITTEE (In Full) | | | |
| | CNA FINANCIAL CORPORATION CITIZ | ENS FOR | R GOOD GOVERNMENT | |
| Α. | Full Name (Last, First, Middle Initial) Dawn Griffin | | | Date of Receipt |
| | Mailing Address CNA Plaza | | | 06 15 2005 |
| | City | State | Zip Code | Transaction ID: SA11A1.7481 |
| | Chicago | <u>IL</u> | 60685 | Amount of Each Receipt this Period |
| | FEC ID number of contributing federal political committee. | C | | 300.00 |
| | Name of Employer CNA | Occupation Executive | | Contribution |
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| | Other (specify) ▼ | 0 0 | 300.00 | |
| В. | Full Name (Last, First, Middle Initial) Lynn Gugenheim | | | Date of Receipt |
| | Mailing Address CNA Plaza | | | 05 13 YYYYY 2005 |
| | City | State | Zip Code | Transaction ID: SA11A1.6948 |
| | Chicago | IL | 60685 | Amount of Each Receipt this Period |
| | FEC ID number of contributing federal political committee. | C | | 750.00 |
| | Name of Employer CNA | Occupation Executive | | Contribution |
| | Receipt For: | | e Year-to-Date ▼ | |
| | Primary General | | | 7 |
| | Other (specify) ▼ | 0 0 | 750.00 | |
| C. | Full Name (Last, First, Middle Initial) Catherine Guilfoyle | | | Date of Receipt |
| | Mailing Address CNA Plaza | | | 05 13 7 2005 |
| | City | State | Zip Code | Transaction ID: SA11A1.6949 |
| | Chicago | IL | 60685 | Amount of Each Receipt this Period |
| | FEC ID number of contributing federal political committee. | C | | 300.00 |
| | Name of Employer CNA | Occupation Executive | | Contribution |
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| $\overline{\rangle}$ | NAME OF COMMITTEE (In Full) CNA FINANCIAL CORPORATION CITIZE | ENS FOR | GOOD GOVERNMENT | |
| Δ. | Full Name (Last, First, Middle Initial) Michael Haas Mailing Address CNA Plaza City Chicago FEC ID number of contributing federal political committee. | State IL | Zip Code 60685 | Date of Receipt M M M / D D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y |
| | CNA Insurance | Occupation Executive Aggregate | | |
| 3. | Full Name (Last, First, Middle Initial) James Harms Mailing Address CNA Plaza | | | Date of Receipt 05 09 2005 |
| | Chicago | State II | Zip Code | Transaction ID: SA11A1.6899 |
| | Chicago FEC ID number of contributing federal political committee. | C | 60685 | Amount of Each Receipt this Period 300.00 |
| | CNA | Occupation Executive Aggregate | | Contribution |
| Э. | Full Name (Last, First, Middle Initial) Anna Hicks Mailing Address CNA Plaza | | | Date of Receipt M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y |
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| $\left. \right\rangle$ | NAME OF COMMITTEE (In Full) CNA FINANCIAL CORPORATION CITIZENS FC | R GOOD GOVERNMENT | | | |
| Α. | Full Name (Last, First, Middle Initial) Fatmire Hotza | | Date of Receipt | | |
| | Mailing Address CNA Plaza | | 05 13 2005 | | |
| | City State Chicago IL | Zip Code 60685 | Transaction ID: SA11A1.6959 Amount of Each Receipt this Period | | |
| | FEC ID number of contributing federal political committee. | | 400.00 | | |
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| | | tte Year-to-Date ▼ 400.00 | | | |
| В. | | | Date of Receipt | | |
| | Mailing Address CNA Plaza | | 05 13 2005 | | |
| | City State Chicago IL | Zip Code | Transaction ID: SA11A1.6961 | | |
| | FEC ID number of contributing federal political committee. | 60685 | Amount of Each Receipt this Period 500.00 | | |
| | Name of Employer Occupati | | Contribution | | |
| | Receipt For: Primary General Other (specify) Aggrega | te Year-to-Date ▼ 500.00 | | | |
| <u> </u> | Full Name (Last, First, Middle Initial) Dawn Jaffray | | Date of Receipt | | |
| | Mailing Address CNA Plaza | | 05 13 2005 | | |
| | City State Chicago IL | Zip Code 60685 | Transaction ID: SA11A1.6962 Amount of Each Receipt this Period | | |
| | FEC ID number of contributing federal political committee. | | 2000.00 | | |
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| <u>/</u> | Full Name (Last, First, Middle Initial) | | | | | |
| A. | Jacqueline Johnson | | | Date of Receipt | | |
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| _ | Full Name (Last, First, Middle Initial) | | | | | |
| B. | Steven Jones | | | Date of Receipt | | |
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| | Full Name (Last, First, Middle Initial) | | | | | |
| C. | Richard Kaminsky | | | Date of Receipt | | |
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| | City Chicago | IL | Zip Code 60685 | Transaction ID: SA11A1.6969 | | |
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| | NAME OF COMMITTEE (In Full) | | | | | | | | |
| | CNA FINANCIAL CORPORATION CITIZ | ZENS FOF | R GOOD GOVERNME | NT | | | | | |
| Α. | Full Name (Last, First, Middle Initial) Jonathan Kantor | | | | Date of Receipt | | | | |
| | Mailing Address CNA Plaza | | | | 04 14 2005 | | | | |
| | City | State | Zip Code | | Transaction ID: SA11A1.6884 | | | | |
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| | Name of Employer CNA | Occupation Executive | | | Contribution | | | | |
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| — В. | Full Name (Last, First, Middle Initial) Robert Keith | | | | Date of Receipt | | | | |
| | Mailing Address CNA Plaza | | 05 13 7 2005 | | | | | | |
| | City | State | Zip Code | | Transaction ID: SA11A1.6973 | | | | |
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| | Primary General Other (specify) | | 750. | .00 | | | | | |
| <u> </u> | Full Name (Last, First, Middle Initial) Karen Knight | | | | Date of Receipt | | | | |
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| $\overline{}$ | NAME OF COMMITTEE (In Full) | | | | | | | | |
| | CNA FINANCIAL CORPORATION CITIZ | ZENS FOF | R GOOD GOVERNM | IENT | | | | | |
| Α. | Full Name (Last, First, Middle Initial) Lori Komstadius | | | | Date of Receipt | | | | |
| | Mailing Address CNA Plaza | | | | 04 14 2005 | | | | |
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| | Receipt For: Primary General Other (specify) ▼ | | | | | | | | |
| — В. | Full Name (Last, First, Middle Initial) Carla Kambric Lammers | | | | Date of Receipt | | | | |
| | Mailing Address CNA Plaza | | 05 13 7 9 9 9 | | | | | | |
| | City | State | Zip Code | | Transaction ID: SA11A1.6981 | | | | |
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| | Primary General Other (specify) | | 50 | 00.00 | | | | | |
| <u> </u> | Full Name (Last, First, Middle Initial) John Landenberger | | | | Date of Receipt | | | | |
| | Mailing Address CNA Plaza | | | | 05 13 2005 | | | | |
| | City | State | Zip Code | | Transaction ID: SA11A1.6983 | | | | |
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| A. | | | | Date of Receipt | | |
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| В. | Full Name (Last, First, Middle Initial) James Lewis | | | Date of Receipt | | |
| | Mailing Address CNA Plaza | | | 04 26 2005 | | |
| | City | State | Zip Code | Transaction ID: SA11A1.6877 | | |
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| C. | Full Name (Last, First, Middle Initial) Stephen Lilienthal | | | Date of Receipt | | |
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| $\overline{\rangle}$ | NAME OF COMMITTEE (In Full) CNA FINANCIAL CORPORATION CITIZ | | | | | | | |
| ۹. | Full Name (Last, First, Middle Initial) Brian Loebach | | | Date of Receipt | | | | |
| | Mailing Address CNA Plaza | | | 05 13 7 Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y | | | | |
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| | Primary General Other (specify) ▼ | 0 0 | 500.00 | | | | | |
| 3. | Full Name (Last, First, Middle Initial) Gail Long | | | Date of Receipt | | | | |
| Mailing Address CNA Plaza | | | | 05 13 / 4 2005 | | | | |
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| C. | Full Name (Last, First, Middle Initial) Michael Mallon | | | Date of Receipt | | | | |
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| | Full Name (Last, First, Middle Initial) | | | | | |
| В. | Todd Marks | | | Date of Receipt | | |
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| | Other (specify) ▼ | | 250.00 | | | |
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| _ | Full Name (Last, First, Middle Initial) | | | | | |
| C. | Brian Mibus | | | Date of Receipt | | |
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| | federal political committee. | C | | 300.00 | | |
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| \setminus | NAME OF COMMITTEE (In Full) | | | | | |
| | CNA FINANCIAL CORPORATION CITIZ | ZENS FOR | GOOD GOVERNMENT | | | |
| Α. | Full Name (Last, First, Middle Initial) George Moore | | | Date of Receipt | | |
| | Mailing Address CNA Plaza | | | 05 13 7 2005 | | |
| | City | State | Zip Code | Transaction ID: SA11A1.7005 | | |
| | Chicago | IL | 60685 | Amount of Each Receipt this Period | | |
| | FEC ID number of contributing federal political committee. | C | | 500.00 | | |
| | Name of Employer CNA | Occupation Executive | | Contribution | | |
| | Receipt For: | | Year-to-Date ▼ | | | |
| | Primary General | | | 1 | | |
| | Other (specify) ▼ | | 500.00 | | | |
| В. | Full Name (Last, First, Middle Initial) Lew Nathan | | | Date of Receipt | | |
| | Mailing Address CNA Plaza | | | 0 4 | | |
| | City State | | Zip Code | Transaction ID: SA11A1.6886 | | |
| | Chicago | <u>IL</u> | 60685 | Amount of Each Receipt this Period | | |
| | FEC ID number of contributing federal political committee. | С | | 750.00 | | |
| | Name of Employer CNA | Occupation Executive | | Contribution | | |
| | Receipt For: | Aggregate | Year-to-Date ▼ | | | |
| | Primary General Other (specify) ▼ | | 750.00 | | | |
| <u> </u> | Full Name (Last, First, Middle Initial) Sarah Pang | | | Date of Receipt | | |
| | Mailing Address CNA Plaza | | | M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y | | |
| | City | State | Zip Code | Transaction ID: SA11A1.7453 | | |
| | Chicago | IL | 60685 | Amount of Each Receipt this Period | | |
| | FEC ID number of contributing federal political committee. | C | | 1000.00 | | |
| CNA | | | | - Contribution | | |
| | Name of Employer CNA | Occupation Executive | | Contribution | | |
| | Name of Employer CNA Receipt For: | Executive | | Contribution | | |
| | | Executive |) | Contribution | | |
| s | Receipt For: Primary General | Executive Aggregate | Year-to-Date ▼ 1000.00 | 2250.00 | | |

| S | CHEDULE A (FEC Form 3X) | | Use separate schedule(s) | FOR LINE NUMBER: PAGE 23/34 | | |
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| | EMIZED RECEIPTS | | or each category of the | (check only one) | | |
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| or | ny information copied from such Reports and Sta for commercial purposes, other than using the n | ame and add | lress of any political committee to | o solicit contributions from such committee. | | |
| \setminus | NAME OF COMMITTEE (In Full) | | | | | |
| | CNA FINANCIAL CORPORATION CITIZ | ZENS FOR | GOOD GOVERNMENT | | | |
| Α. | Full Name (Last, First, Middle Initial) Cathy Pierce | | | Date of Receipt | | |
| | Mailing Address CNA Plaza | | | 05 13 7 2005 | | |
| | City | State | Zip Code | Transaction ID: SA11A1.7021 | | |
| | Chicago | <u>IL</u> | 60685 | Amount of Each Receipt this Period | | |
| | FEC ID number of contributing federal political committee. | | | 300.00 | | |
| | Name of Employer CNA | Occupation Executive | | Contribution | | |
| | Receipt For: | | Year-to-Date ▼ | | | |
| | Primary General | 1 1 | 300.00 | 7 | | |
| | Other (specify) ▼ | | 300.00 | | | |
| В. | Full Name (Last, First, Middle Initial) Robert Rice | | | Date of Receipt | | |
| | Mailing Address CNA Plaza | | | 05 / 13 / 2005 | | |
| | City | State | Zip Code | Transaction ID: SA11A1.7027 | | |
| | Chicago | IL | 60685 | Amount of Each Receipt this Period | | |
| | FEC ID number of contributing federal political committee. | C | | 250.00 | | |
| | Name of Employer CNA Insurance | Occupation Executive | | Contribution | | |
| | Receipt For: | Aggregate | Year-to-Date ▼ | | | |
| | Primary General Other (specify) ▼ | | 250.00 | | | |
| <u> </u> | Full Name (Last, First, Middle Initial) Louis Roberts | | | Date of Receipt | | |
| | Mailing Address CNA Plaza | | | M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y | | |
| | City | State | Zip Code | Transaction ID: SA11A1.7028 | | |
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| | Name of Employer CNA | Occupation Executive | | Contribution | | |
| | | Occupation Executive | | Contribution | | |
| | Name of Employer CNA | Occupation Executive |) | Contribution | | |
| s | Name of Employer CNA Receipt For: Primary General | Occupation Executive Aggregate | Year-to-Date ▼ 500.00 | Contribution | | |
| \vdash | Name of Employer CNA Receipt For: Primary General Other (specify) ▼ | Occupation Executive Aggregate | Year-to-Date ▼ 500.00 | | | |

| SCHEDULE A (FEC Form 3X) | | Use separate schedule(s) | FOR LINE NUMBER: PAGE 24 / 34 | | |
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| NAME OF COMMITTEE (In Full) | | | | | |
| CNA FINANCIAL CORPORATION CIT | TIZENS FOR | R GOOD GOVERNMENT | | | |
| Full Name (Last, First, Middle Initial) A. Daniel Rockwell | | | Date of Receipt | | |
| Mailing Address CNA Plaza | | | 05 26 2005 | | |
| City | State | Zip Code | Transaction ID: SA11A1.7450 | | |
| Chicago | <u>IL</u> | 60685 | Amount of Each Receipt this Period | | |
| FEC ID number of contributing federal political committee. | C | | 350.00 | | |
| Name of Employer CNA Insurance | Occupation Executive | | Contribution | | |
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| Other (specify) ▼ | 0 0 | 350.00 | | | |
| Full Name (Last, First, Middle Initial) B. Vicky Russell | • | | Date of Receipt | | |
| Mailing Address CNA Plaza | | | 05 13 2005 | | |
| City | State | Zip Code | Transaction ID: SA11A1.7030 | | |
| Chicago | IL | 60685 | Amount of Each Receipt this Period | | |
| FEC ID number of contributing federal political committee. | C | | 750.00 | | |
| Name of Employer CNA Insurance | Occupation Executive | | Contribution | | |
| Receipt For: | Aggregate | e Year-to-Date ▼ | | | |
| Primary General Other (specify) ▼ | | 750.00 | | | |
| Full Name (Last, First, Middle Initial) C. Thomas Scott | | | Date of Receipt | | |
| Mailing Address CNA Plaza | | | 0 5 1 3 2 0 0 5 | | |
| City | State | Zip Code | Transaction ID: SA11A1.7031 | | |
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| federal political committee. | C | | 750.00 | | |
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| <u>\</u> | NAME OF COMMITTEE (In Full) | arric aria add | areas or arry pointed committee to | Soliot contributions from such committee. | | |
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| | CIVAT INANCIAL CORFORATION CITIZ | LLINGTOF | GOOD GOVERNIVIENT | | | |
| | Full Name (Last, First, Middle Initial) | | | | | |
| A. | Michael Sehr | | | Date of Receipt | | |
| | Mailing Address CNA Plaza | | | 05 13 2005 | | |
| | City | State | Zip Code | Transaction ID: SA11A1.7032 | | |
| | Chicago | IL | 60685 | | | |
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| | FEC ID number of contributing federal political committee. | C | | 750.00 | | |
| | | | | Contribution | | |
| | Name of Employer CNA | Occupation | | Continuation | | |
| | Daniel Ferr | Executive | | _ | | |
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| В. | | | | Date of Receipt | | |
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| | City | State | Zip Code | Transaction ID: SA11A1.6889 | | |
| | Chicago | ID | 60685 | Amount of Each Receipt this Period | | |
| | FEC ID number of contributing | | | | | |
| | federal political committee. | C | | 300.00 | | |
| | Name of European | | | Contribution | | |
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| C. | Full Name (Last, First, Middle Initial) | | | Data of Pagaint | | |
| C. | Jerry Sliwa Mailing Address CNA Plaza | | | Date of Receipt | | |
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| | federal political committee. | C | | 300.00 | | |
| | Name of Employer CNA | Occupation | 1 | Contribution | | |
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| S | CHEDULE A (FEC Form 3X) | | Use separate schedule(s) | FOR LINE NUMBER: | PAGE 26/34 | | |
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| or | ly information copied from such Reports and Sta for commercial purposes, other than using the r | name and add | dress of any political committee to | solicit contributions from su | uch committee. | | |
| | NAME OF COMMITTEE (In Full) | | | | | | |
| \rangle | CNA FINANCIAL CORPORATION CITI | ZENS FOF | GOOD GOVERNMENT | | | | |
| Α. | Full Name (Last, First, Middle Initial) Stephen Stonehouse | | | Date of Receipt | | | |
| | Mailing Address CNA Plaza | | | 0 5 / D D D D D D D D D D D D D D D D D D | 2005 | | |
| | City | State | Zip Code | Transaction ID: SA | I1A1.7045 | | |
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| | Name of Employer CNA | Occupation Executive | | Contribution | | | |
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| | Primary General | | | 1 | | | |
| | Other (specify) | 0 0 | 500.00 | | | | |
| В. | Full Name (Last, First, Middle Initial) Karen Stuttman | | | Date of Receipt | | | |
| | Mailing Address CNA Plaza | 05 13 | 2005 | | | | |
| | City | State | Zip Code | Transaction ID: SA11A1.7046 | | | |
| | Chicago | <u> </u> | 60685 | Amount of Each Rec | eipt this Period | | |
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| | Name of Employer CNA | Occupation Executive | | Contribution | | | |
| | Receipt For: | Aggregate | Year-to-Date ▼ | | | | |
| | Primary General Other (specify) ▼ | | 300.00 | | | | |
| _ | Full Name (Last, First, Middle Initial) Kathy Szur | | | Date of Receipt | | | |
| Ο. | Mailing Address CNA Plaza | | | M M / D D | / Y Y Y Y | | |
| | | | | 05 13 | 2005 | | |
| | City | State | Zip Code | Transaction ID: SA | I1A1.7048 | | |
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| | FEC ID number of contributing federal political committee. | C | | | 300.00 | | |
| | Name of Employer CNA | Occupation Executive | | Contribution | | | |
| | Receipt For: | Aggregate | Year-to-Date ▼ | | | | |
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| SCHEDULE A (FEC Form 3X) | | | Use separate schedule(s) | FOR LINE NUMBER: PAGE 27 / 34 | | | | | | | | |
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| or | y information copied from such Reports and Staten for commercial purposes, other than using the nam | nents may ie and add | rnot be sold or used by any perso Iress of any political committee to | on for the purpose of soliciting contributions solicit contributions from such committee. | | | | | | | | |
| \setminus | NAME OF COMMITTEE (In Full) | | | | | | | | | | | |
| $ \rangle$ | CNA FINANCIAL CORPORATION CITIZE | NS FOR | GOOD GOVERNMENT | | | | | | | | | |
| Α. | Full Name (Last, First, Middle Initial) David Tenembaum | | | Date of Receipt | | | | | | | | |
| | Mailing Address CNA Plaza | | | M M / D D / Y Y Y Y Y O S 1 3 2 0 0 5 | | | | | | | | |
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| | federal political committee. | С | | 300.00 | | | | | | | | |
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| | Primary General | 1 1 | 000.00 | 1 | | | | | | | | |
| | Other (specify) ▼ | 0 0 | 300.00 | | | | | | | | | |
| В. | Full Name (Last, First, Middle Initial) Sandra Wagman | | | Date of Receipt | | | | | | | | |
| | Mailing Address CNA Plaza | | | M M / D D / Y Y Y Y | | | | | | | | |
| | | | | 04 26 2005 | | | | | | | | |
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| | federal political committee. | | | | | | | | | | | |
| | Name of Employer CNA | Occupation | 1 | Contribution | | | | | | | | |
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| C. | Full Name (Last, First, Middle Initial) Michael Warnick | | | Date of Receipt | | | | | | | | |
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| | federal political committee. | <u> </u> | | | | | | | | | | |
| | Name of Employer CNA | Occupation | 1 | Contribution | | | | | | | | |
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| SCHEDULE B (FEC Form 3X) Use seperate schedule(s) FOR LINE NUMBER: PAGE 28 / 34 | | | | 34 | | | | | | |
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| $\left. \right\rangle$ | NAME OF COMMITTEE (In Full) CNA FINANCIAL CORPORATION CITIZE | | | | | | Tom Guon | 3011111 | | |
| ۹. | Full Name (Last, First, Middle Initial) Baker for Congress | | | | | saction ID of Disburs | SB23.6 | 868 | | |
| | Mailing Address PO Box 1694 | | | | 0 ^M 3 | M / D | 24 | ž | 0 Ď 5 | Y |
| | | State LA | Zip Code 70821-9990 | | Amou | int of Eac | h Disburse | - | | - |
| | Purpose of Disbursement Contribution | | | | | | | 1 | 000.0 | 00 |
| | Candidate Name Office Sought: X House Disburse | ment For: | | ategory/ Type | _ | | | | | |
| | Senate President State: LA District: 06 | Primary Other (spe | X General cify) ▼ | | | | | | | |
| 3. | Full Name (Last, First, Middle Initial) Ben Nelson for U.S. Senate Committee | | | | | saction ID | D: SB23.7 sement | 458 | | |
| | Mailing Address 420 C Street, NE | | | | 0 ^M 5 | M / D | 26 / T | Ž | 0 Ď 5 | Y |
| | , | State DC | Zip Code 20002 | | Amou | int of Eacl | h Disburse | | | - |
| | Purpose of Disbursement Contribution Candidate Name | | | 002 ategory/ | | | | . 2 | 0.00.0 | JU |
| | • 🗎 | ment For: | | Туре | | | | | | |
| | X Senate President State: NE District: | Primary Other (spe | X General cify) ▼ | | | | | | | |
| Э. | Full Name (Last, First, Middle Initial) CARPER FOR SENATE | | | | Date | of Disburs | | 860 | | |
| | Mailing Address 19 EAST COMMONS BL | VD SECO | ND FLOOR | | 0 ^M 1 | M / D | 10 / | ž | 0 Ď 5 | Y |
| | | State DE | Zip Code 19720 | | Amou | ınt of Eac | h Disburse | | | - |
| | Purpose of Disbursement Contribution Candidate Name | | | | | 0 0 | | . 1 | 000.0 | 00 |
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| \rangle | NAME OF COMMITTEE (In Full) CNA FINANCIAL CORPORATION CITIZE | | | | | | | | | | |
| ۹. | Full Name (Last, First, Middle Initial) Citizens for Mark Kirk | | | | | Date | of Disburs | | | V | V |
| | Mailing Address 1161 Wayzata Blvd., Ste | 210 | | | | 0 ^M 6 | , , | 22 / | 2 | 0 Ď 5 | |
| | , | State MN | Zip Code 55391 | | | Amou | int of Eac | h Disburse | | | - |
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| | Senate President | ment For: Primary Other (spe | X General cify) ▼ | | | | | | | | |
| | State: IL District: 10 Full Name (Last, First, Middle Initial) | | | | | Trans | action IF |): SB23.7 | 461 | | |
| 3. | DONALD A. MANZULLO FOR CONGRES | S | | | | Date | of Disburs | sement | | Y | Υ |
| | Mailing Address PO Box 7783 PO Box 7783 | | | | | 0 5 | | 26 | 2 | 0 Ď 5 | |
| | City Rockford | State IL | Zip Code 61126 | | | Amou | int of Eac | h Disburse | - | | - |
| | Purpose of Disbursement Contribution | | | Г | | | | | . 1 | 0.000 | 00 |
| | Candidate Name | | | | ategory/ Type | | | | | | |
| | Office Sought: X House Senate President State: IL District: 16 | ment For: Primary Other (spe | X General cify) ▼ | | | | | | | | |
| Э. | Full Name (Last, First, Middle Initial) FRIENDS OF KENT CONRAD | | | | | | of Disburs | | 862 | | |
| | Mailing Address PO BOX 812 | | | | | 0 2 | M / D | 23 / | ž | 0 Ď 5 | Y |
| | City BISMARCK | State ND | Zip Code 58502 | | | Amou | int of Eac | h Disburse | ement | this F | eriod |
| | Purpose of Disbursement Contribution | | | Г | • | | | | 1 | 000.0 | 00 |
| | Candidate Name | | | | ategory/ Type | | | | | | |
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| | e and address of any political c | OHIII | iillee lo s | SOIICIL | CONTIN | Dutions | TIOI | n such c | COLLI | niilee | | |
| NAME OF COMMITTEE (In Full) CNA FINANCIAL CORPORATION CITIZE | NS FOR GOOD GOVERN | NME | NT | | | | | | | | | |
| Full Name (Last, First, Middle Initial) | | | | 1 | Transa | ction | ID: S | SB23.6 | 871 | | | |
| Gard for Congress Exploratory | | | | I | Date of | | | | / · V | V | V | |
| Mailing Address PO Box 277 | | | | | 0 4 | J'L | ^D 26 | 5 ' [| 2 | 0 Ó 5 | | |
| City Green Bay | State Zip Code WI 54305 | | | , | Amoun | t of Ea | ch [| Disburse | men | t this F | erio | d |
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| Senate President | Primary X General Other (specify) ▼ | | | | | | | | | | | |
| State: WI District: 8 | , (-p y) ↓ | | | | | | | | | | | |
| Full Name (Last, First, Middle Initial) | | | | 1 | Γransa | ction | ID: S | SB23.6 | 864 | | | |
| 3. HASTERT FOR CONGRESS COMMITTE | E | | | | Date of | | | | | | | |
| Mailing Address P. O. Box 625 PO BOX 625 | | | | | 0 3 |] | ^D 2 ⁴ | 1 / Y | Ž | 0 Ď 5 | Y | |
| City Batavia | State Zip Code IL 60510 | | | 1 | Amoun | t of Ea | ch C | Disburse | men | t this F | erio | d |
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| JERRY WELLER FOR CONGRESS INC. | | | | | Transa Date of | Disbu | ırsen | | | V * | V | |
| Mailing Address P.O. Box 15283 | | | | | 0 6 | J'L | ^D 2 2 | 2 / | 2 | 0 Ď 5 | | |
| City Washington | State Zip Code DC 20003 | | | , | Amoun | t of Ea | ch [| Disburse | | | - | d |
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| NAME OF COMMITTEE (In Full) CNA FINANCIAL CORPORATION CITIZ | ENS FOR GOOD GOVERN | IMEI | NT | | | | | | | | |
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| Mailing Address 675 North Washington Suite 410 | | | | | 3 | 2 | 2.4 | 2 | 0 Ď 5 | | |
| City Alexandria | State Zip Code VA 22314 | | | Ar | nount | of Each | Disburse | emen | t this P | erio | t |
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| 3. LEAHY FOR U.S. SENATOR COMMITTE | Έ | | | Da | | Disburse | | | ٧ | Y | |
| Mailing Address PO BOX 53 | | | | | 6 " | 2 | 2 7 | 2 | 0 0 5 | | |
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| Mailing Address Post Office Box 52956 333 Texas Street Suite | | | | | 6 | 2 | 2 2 / | 2 | 0 Ó 5 | _ | |
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| | NAME OF COMMITTEE (In Full) CNA FINANCIAL CORPORATION CIT | IZENS FOR (| GOOD GOVEF | RNMEI | NT | | | | | | | | | | |
| Α. | Full Name (Last, First, Middle Initial) MIKE DEWINE FOR US SENATE | | | | | | | on ID: | _ | - | | 0 ŏ 5 | _ Y | | |
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| | Mailing Address 506 Crisp Wind Court | | | | | 0 6 | IVI | | 2 2 | Ĺ. | ž 0 ŏ | 5 |
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| Ь. | Committee to Elect Blessing (Louis) | | | | | Date M | of D | isburs | | | V V | V |
| | Mailing Address 3153 McGill Lane | | | | | 0 6 | IVI | 2 | 2 2 D | Ĺ. | žoŏ | 5 |
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| C. | Full Name (Last, First, Middle Initial) Husted for State Representative | | | | | | | on ID | | 29.776 t | 8 | |
| | Mailing Address 148 Sherbrooke Drive | | | | | o ^M 6 | М | / D2 | 2 2 D | / Y | ž 0 ŏ | 5 ^Y |
| | City Kettering | State Zip Code OH 45429 | | | | Amou | unt o | f Each | n Disb | urseme | ent this | Period |
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| ٩. | Seitz for State Representative (Bill) | | | Date of Disbursement |
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